Notice of Dissolution



JAN 1 5 2003 pm 1-13

FORM		(Rev. 07/02)
	DR-3	
	NOTICE OF	
	DISSOLUTION	
	DIOCOLOTICIA	
For Office L	<u>Jse Only</u>	
	1200	
Comm. #	100	
Indexed		
Audited		
Computer		
Certified Dat	e of Dissolution	

COMMITTEE NAME

Burken for State Senate
Official Name of Committee
3753 220th St.
Street
Clinton, IA 52732
City, State, Zip Code
(563) 522-2859
Area Telephone Code

WHEN TO FILE:

The Notice of Dissolution must be filed within thirty (30) days of completion of all the following:

- 1. All debts, loans and obligations have been paid or transferred;
- 2. All campaign funds have been spent;
- 3. All campaign property sold or transferred (candidates only); and
- 4. A final report disclosing all transactions closing the committee.

For state candidates and state PACs, a final bank statement must be filed with the Notice of Dissolution or as soon as possible if the bank statement is not available at the time the Notice of Dissolution is filed.

Signature of Candidate or Treasurer (if candidate's committee)/Signature of Chair or Treasurer (if PAC)

Date Signed

FOR INSTRUCTIONS, SEE BACK OF FORM

This form is not applicable to statutory political committees.

COMMITTEE NAME (Must be same as an Statement of Organization) Statement Security	FOR INSTRUCTIONS, SEE BACK OF FORM	FORM
IMPORTANT: Indicate type of committee you are reporting for: 1 (1) Statewident-galacteric Candidate (2) Statewiden PAC (3) State Party (4) Coumy/Local Candidate (6) Statewiden PAC (3) State Party (4) Coumy/Local Candidate (8) Statewiden PAC (3) State Party (4) Coumy/Local Candidate (8) Statewiden PAC (3) State Party (4) Coumy/Local Candidate (8) Statewiden PAC (3) State Party (4) Coumy/Local Candidate (8) Statewiden PAC (3) State Party (4) Coumy/Local Candidate (8) Statewiden PAC (3) State Party (4) Coumy/Local Candidate (8) State of Candidate	DISCLOSURE SUMMARY PAGE	DR-2 DISCLOSURE
IMPORTANT: Indicate type of committee you are reporting for: 1 Sistemetical Egistative Condidate (2) Sistemetica PAC (3) Shale Party (4) County/Local Candidate 2 Sistemetical Egistative Condidate (2) Sistemetica PAC (3) Shale Party (4) County/Local Candidate 3 Sistemetical Egistative Condidate (2) Sistemetica PAC (3) Shale Party (4) County/Local Candidate 3 Sistemetical Egistative Condidate (3) Sistemetical Party Candidate Name Political Party Sistemetical Party		
StatewiderLegislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate (2) County Pack (6) Ballot issuffranchise Committee (7) County/City Central Committee (3) Support State of Candidates (4) State of Candidates (IMPORTANT: Indicate type of committee you are reporting for:	Comm. # 398
Candidate Name JERTHE T BULKEU Office Sought STATE SENATE District (if Senate or House) DEC 2 9 2003 SIGNATURE OF TREASURER (or person filling this report) Routine Penalties Due For Late Filed Reports Range from \$20 to \$800 SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE: I AM FILING A JANUARY 19, 2003 (report date) MCHECK IF AMENDMENT TO REPORT DATED JANUARY 19, 2005 (report date) County & Local Committees, enter Date of Election (You gust continue to file reports until a Notice of Dissolution is filed.) MEVIOUSLY, TILED STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.) SCHEDULA: A TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule A) ("also see in-kind below) SCHEDULA: A Schedule H: Total Sales of Campaign Property (Attach Schedule H) (Schedule B: Expenditures total (Attach Schedule B) ("also see debts and loans below) SUB-TOTAL\$ SUB-TOTAL\$ SUB-TOTAL	(5)County PAC (6)Ballot Issue/Franchise Committee (7)County/City Central Committee	Audited
SIGNATURE OF TREASURER (or person filing this report) SIGNATURE OF TREASURER (or person filing this report) Routine Penalties Due For Late Filed Reports Range from \$20 to \$800 SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE: I AM FILING A JAWARY 19, 2003 REPORT FOR ANA (1) ELECTION /(2)NON-ELECTION YEAR. (report date) MCHECK IF AMENDMENT TO REPORT DATED JANVARY 19, 2003. [Local Committees, enter Date of Election (You grust continue to file reports until a Notice of Dissolution Form DR-3. (You grust continue to file reports until a Notice of Dissolution is filed.) STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.) ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule A) ("also see in-kind below)	CANDIDATE COMMITTEES ONLY:	
SIGNATURE OF TREASURER (or person filing this report) SIGNATURE OF TREASURER (or person filing this report) Routine Penalties Due For Late Filed Reports Range from \$20 to \$800 SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE: I AM FILING A JAWARY 19, 2003 REPORT FOR ANA (1) ELECTION /(2)NON-ELECTION YEAR. (report date) MCHECK IF AMENDMENT TO REPORT DATED JANVARY 19, 2003. [Local Committees, enter Date of Election (You grust continue to file reports until a Notice of Dissolution Form DR-3. (You grust continue to file reports until a Notice of Dissolution is filed.) STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.) ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule A) ("also see in-kind below)		DISCLOSUPE AMPAIGN
SIGNATURE OF TREASURER (or person filling this report) Routine Penalties Due For Late Filed Reports Range from \$20 to \$800 SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE: I AM FILING A JANUARY 19, 2003 REPORT FOR ANA (1) ELECTION (2)NON-ELECTION YEAR. (report date) Indicate one Local Committees, enter Date of Election WCHECK IF AMENDMENT TO REPORT DATED JANUARY 19, 2003 County & Local Committees, enter Date of Election WYOU gust continue to file reports until a Notice of Dissolution Form DR-3. (You gust continue to file reports until a Notice of Dissolution is filled.) STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.) ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule A) ("also see in-kind below) 1146.20 Schedule H: Total Sales of Campaign Property (Attach Schedule H) 5055.43 SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) ("also see debts and loans below) 2055.43 Schedule F: Loan Repayments total (Attach Schedule F) 5055.43		DEC 2.9 2002
SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE: I AM FILING A JANUARY 19, 2003 REPORT FOR AN/A (1) ELECTION /(2)NON-ELECTION YEAR. Indicate one I I Indic	Merman 563-242-6	6604 70 26-03
REPORT FOR ANA (1) ELECTION /(2)NON-ELECTION YEAR. (report date) Indicate one	Routine Penalties Due For Late Filed Reports Range f	rom \$20 to \$800
Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. (You must continue to file reports until a Notice of Dissolution is filed.) STATEMENT OF CASH ON HAND	SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE	
Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. (You gust continue to file reports until a Notice of Dissolution is filed.) STATEMENT OF CASH ON HAND	I AM FILING A JANUARY 19, 2003 REPORT FOR ANA (1) ELE	CTION /(2)NON-ELECTION YEAR.
County & Local Committees, enter County in which Election is held STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.) Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	(report date)	
(You must continue to file reports until a Notice of Dissolution is filed.) STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.) ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) Schedule F: Loans Received total (Attach Schedule F) Schedule H: Total Sales of Campaign Property (Attach Schedule H) (Schedule H applies to Candidates' Committees Only) SUB-TOTAL SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) (*also see debts and loans below) Schedule F: Loan Repayments total (Attach Schedule F)	WICHECK IF AMENDMENT TO REPORT DATED JANUARY 19, 2008.	Local Committees, enter Date of Election
STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.) ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) Schedule F: Loans Received total (Attach Schedule F) Schedule H: Total Sales of Campaign Property (Attach Schedule H) (Schedule H applies to Candidates' Committees Only) SUB-TOTAL SUB-TOTAL SUB-TOTAL Sub-55, 43 Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) Schedule F: Loan Repayments total (Attach Schedule F)	(You must continue to file reports until a Notice of Dissolution is filed.)	
CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.) ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) Schedule F: Loans Received total (Attach Schedule F) Schedule H: Total Sales of Campaign Property (Attach Schedule H) (Schedule H applies to Candidates' Committees Only) SUB-TOTAL SUB-TOTAL SUB-TOTAL Substanting Period Schedule B: Expenditures total (Attach Schedule B) (*also see debts and loans below) Schedule F: Loan Repayments total (Attach Schedule F)	PREVIOUSLY FILED	
CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.) ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) Schedule F: Loans Received total (Attach Schedule F) Schedule H: Total Sales of Campaign Property (Attach Schedule H) (Schedule H applies to Candidates' Committees Only) SUB-TOTAL SUB-TOTAL SUB-TOTAL Substanting Period Schedule B: Expenditures total (Attach Schedule B) (*also see debts and loans below) Schedule F: Loan Repayments total (Attach Schedule F)	STATEMENT OF CASH ON HAND	
of the last reporting period, or must be zero if this is first report filed.) ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held	
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	of the last reporting period, or must be zero if this is first report filed.)	s <u>1209, 23</u>
Schedule F: Loans Received total (Attach Schedule F)		2111 00
Schedule F: Loans Received total (Attach Schedule F)	Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	1146,30
SUB-TOTAL\$ 3\(\sigma 55, 43\) SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) Schedule F: Loan Repayments total (Attach Schedule F)	Schedule F: Loans Received total (Attach Schedule F)	
SUB-TOTAL\$ 3\655, 43 SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) Schedule F: Loan Repayments total (Attach Schedule F)	Schedule H: Total Sales of Campaign Property (Attach Schedule H)	
Schedule F: Loan Repayments total (Attach Schedule F)		
Schedule F: Loan Repayments total (Attach Schedule F)	SUB-TOTA	L\$ 2655, 43
Schedule F: Loan Repayments total (Attach Schedule F)	SUBTRACT TOTAL MONEY SPENT THIS PERIOD	
	Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans bek	ow) 3655.43
CASH ON HAND at the end of this reporting period (if final most belones must	Schedule F: Loan Repayments total (Attach Schedule F)	
	CASH ON HAND at the end of this reporting period (if final report, balance must	2-
be zero) (Attach DR-3)	be zero) (Attach DR-3)	\$
**UNPAID BILLS (From Schedule D - Attach Schedule D)	**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$ 179.01
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) \$ + 984 \(\lambda\).	*IN KIND CONTRIBUTIONS (From Schedule F - Attach Schedule F)	+9842.1
, , ,	CANDIDATE COMMITTEES ONLY:	¥
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	CONSULTANT BREAKDOWN (Schedule G Attached?)	YES NO

For Instructions, See Back of Form

CONTRIBUTIONS - MONEY TAKEN IN

(including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

BURKEN FOR STATE SENATE

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS	
CHECK THIS BOX IF AMENDING FORM		

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	↑ IF FCR . FUND- RAISER INCOME
	CK#	FROM PREVIOUS PEPORT ATTACHED	·	\$ 719	
1-24-03	ID# CK#	ATTACHED LEGISLATIVE MAJORITY TUNS RETUND OF ASVERTISING	NONE	487,80	
	iD# CK#				
	ID#				
1	ID# CK#	·			
1	ID# CK#				
Ì	ID# CK#				
			SUBTOTAL		

SUB-TOTAL \$

TOTAL (if last page of this schedule) \$ 1146,20

^{*} Ture law requires candidate committees to disclose the relationship of any relative making a contribution to the con....ee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

AS ORIGINALLY FILES

For Instructions, See Back of Form

CONTRIBUTIONS MONEY TAKEN IN (Including candidate's personal funds)	A (Rev. 06/97)	MONETARY RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization)		CK THIS BOX IF NDING FORM
Burken for State Senate		

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER I IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
10/31/02	ID# CK#	Brian L. Schmidt 1499 235th Ave. Delmar, IA 52037	None	\$ 50.00	
10/31/02	ID# CK#	Victor Burken 4298 Highway 136 Clinton, IA 52732	Father	100.00	
10/31/02	ID# CK#	James P. Cahill P.O. Box 99 Preston, IA 52069	None	249.00	
11/11/02	ID# CK#	Thomas J. Berthel 701 Tama St. Bldg B P.O. Box 609 Marion, IA 52302	None	250.00	
11/6/02	ID#	David A. Rose 4426 Bellevue Rd. Clinton, IA 52732	None	70.00	
	ID# CK#				
	!D# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
			SUB-TOTAL	\$	
		TOTAL (if last page	of this schedule)	\$ 719.00	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

SCHEDULE



Legislative Majority Fund

Memorandum

To: Legislative Candidates

From: Andy Warren, Legislative Majority Fund Director

Date: January 24, 2003

Re: Customized Newspaper Advertising Refunds

Message:

Enclosed you will find a refund check from the Customized Newspaper Advertising Agency. This check is for the amount you over paid. It should be marked as a refund on your Campaign and Disclosure Report Forms with the lowa Ethics and Campaign Disclosure Board. If you have questions on how to do this please contact them at 515-281-4028.

Please deposit this check as soon as possible.

CUSTOMIZED NEWSPAPER ADVERTISING

DATE INVOICE NO DESCRIPTION 12/27/02 CK001044

AMOUNT 427.20

NET AMOUNT 4 0 427.20

02111LJ6 PREPAY REFUND CHECK: 001044 12/27/02 JEROME F. BARKER

CHK TOTAL: 427.20

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE
CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE
PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA
ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES	
CHECK THIS BOX IF AMENDING FORM		

COMMITTEE NAME (Must be sam	e as on Statemen	t of Organization)	
BURKEN	FOR.	STATE	SENATE	
70001	7070			

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
	ID#	AS PREVIOUSLY		,
	СК#	BEPORTED PER ATTACHE	6	s 3 28 f. 20
20-1	ID#	CLINTON PRINTINGCO	00	00
A37/03		PO BOY 64 CLINTON, IA	PRINTING	99.51
1/34/03	ID#			
09/03	CK#	JEROME BURKEN 3758 280 th ST. CLINTON, IDWA	MILEAGE	327.69
	ID#			
	CK#			
	ID#			
	СК#			
	ID#			
	ск#			
	ID#	-		
	CK#			
	ID#			
	CK#			,
<u> </u>		~	SUBTOTAL	

SUB-TOTAL \$

TOTAL (if last page of this schedule) \$ 3655.42

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to 3chedule G instructions and Iowa Code 56.6(3)(i).)

Page		of _	
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AS ORIGINALLY FILED

FOR INSTRUCTIONS, SEE BACK OF FORM



EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES	
CHECK THIS BOX IF AMENDING FORM		

COMMITTEE NAME (Must be same as on Statement of Organization)

Burken for State Senate

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
12/12/02	ID# CK# ₁₅₂	Clinton Printing Co. Inc. 1402 Roosevelt St. P.O. Box 64 Clinton, IA 52732	Brochures, envelopes, labels, postcards, mailings, postage	\$ 1,541.55
1/13/03	ID# CK# ₁₅₃	Jerome Burken 3753 220th St. Clinton, IA 52732	Reimbursement Postage	74.00
1/13/03	ID# CK# 153	Jerome Burken 3753 220th St. Clinton, IA 52732	Reimbursement: Office supplies	9.58
1/13/03	ID# CK# ₁₅₃	Jerome Burken 3753 220th St. Clinton, IA 52732	Reimbursement: Office supplies	13.04
1/13/03	ID# CK# ₁₅₃	Jerome Burken 3753 220th St. Clinton, IA 52732	Reimbursement: Fundraiser food	14.25
1/13/03	ID# CK# ₁₅₃	Jerome Burken 3753 220th St. Clinton, IA 52732	Reimbursement: Advertisement	40.50
1/13/03	ID# CK# ₁₅₃	Jerome Burken 3753 220th St. Clinton, IA 52732	Reimbursement: Envelopes	4.24
1/13/03	ID# CK# ₁₅₃	Jerome Burken 3753 220th St. Clinton, IA 52732	Reimbursement: T-shirts Total check #153: \$316.11	160.50
			SUB-TOTAL	\$ 1,857.66

TOTAL (if last page of this schedule)

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 56.6(3)(i).)

Page	1	of	2
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AS ORIGINALLY FILED

FOR INSTRUCTIONS, SEE BACK OF FORM



EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES				
CHECK THIS BOX IF AMENDING FORM					

COMMITTEE NAME (Must be same as on Statement of Organization)

Burken for State Senate

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
1/13/03	ID# CK# ₁₅₄	Void		\$
1/13/03	ID# CK# ₁₅₅	Void	·	
1/13/03	ID# CK# 156	Jerome Burken 3753 220th St. Clinton, IA 52732	Reimbursement: Advertisement	46.06
1/13/03	ID# CK# ₁₅₆	Jerome Burken 3753 220th St. Clinton, IA 52732	Reimbursement: Advertisement	77.35
1/13/03	ID# CK# ₁₅₆	Jerome Burken 3753 220th St. Clinton, IA 52732	Reimbursement: Advertisement	39.36
1/13/03	ID# CK# ₁₅₆	Jerome Burken 3753 220th St. Clinton, IA 52732	Reimbursement: Advertisement	12.00
1/13/03	ID# CK# ₁₅₆	Jerome Burken 3753 220th St. Clinton, IA 52732	Reimbursement: Office supplies Total check #156: \$206.84	32.07
1/13/03	ID# CK# 157	Jerome Burken 3753 220th St. Clinton, IA 52732	Reimbursement: Mileage	163.73
			SUB-TOTAL	\$ 370 57

SUB-TOTAL \$ 370.57

TOTAL (if last page of this schedule)

2,228.23

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(i).)

Page 4 of 4	Page	2	of 2
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Clinton Printing Co.

Phone 563-242-7895
14th Avenue North and Roosevelt – P.O. Box 64
Clinton, Iowa 52732

grom Burken

2,000	995	5/

CLINTON PRINTING CO. INC.

1402 Roosèvelt St. P.O. Box 64 CLINTON, IA 52733-0064

563-242-7895

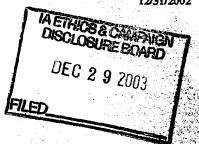
TO:

Burken for Senate Myrna Neumann 312 16th Place Camanche, IA 52730



DATE

12/31/2002



\$ 99.51	•
AMOUNT DUE	AMOUNT ENC.

DATE		TRANSACTION		AMOUNT	BALANCE
11/24/2002 11/25/2002 01/07/2003	Balance forward INV #44991 - 2,000 Re-on PMT	der Card 2 sides 4x8.5, bl	ack ink on 110 white	99.51 -1,541.55	1,541.55 1,641.06 99.51
				·	
				,	
CURRENT	1-30 DAYS PAST DUE	31-60 DAYS PAST DUE	60-90DAYS PAST DUE	OVER 90 DAYS PAST DUE	AMOUNT DUE
17 x 22 Desk C	alendars Still Available				\$99.51

	i		
	£ 1/2		
	81	Juston	1-1
	56	Sabuli	[]
	81	wither	8
	30	Chips	2
	98	Chirle	9
	0 61	Willer REC	- 5
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COMMITTEE NAME	(Must be same	e as on Statement of	(Crganization)
/m3	•		
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DUICHER	1010		Secretary With St. Charles . S. L. Marie

NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.

DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD (DO NOT INCLUDE LOANS - SHOW LOANS ON SCHEDULE F)

SCHEDULE

D INCURRED
(Rev. 08/98) INDEBTEDNESS

CHECK THIS BOX IF AMENDING FORM

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period.. regardless of whether an invoice has been received.

	والمترافظ والمترافي والمترافي والمنافي والمنافي والمنافي والمنافي والمترافي والمترافي والمترافي والمترافي والمترافي	والبراغوان والمنهول والوالي التراهي والمناول والبراء والمارات والمناول والمناولة والمارات والمراجع	sen received.
DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
AUG 9 THRU OFT 16,2008	JEROME BURKEN	MILEAGE	179.91
		٨	
		puro	
	5/6	M	
		·	
		SUB-TOTAL	\$
	TOTAL DEBTS OWED BY COMMITTEE AT TI	HE END OF THIS REPORTING PERIOD	129 01

CANDIDATE COMMITTEES NOTE:

*||Ŧ

'al figure is unknown, show "estimated" beside the figure.

^{*}Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

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FORM DR-2 DISCLOSURE

1			(Rev. 01/2003) REPORT	
			For Office Use Only	
IMPORTANT: Indicate type of committee you are reporting for:	Comm. # 1398 Indexed KH 9			
(1)Statewide/Legislative Candidate (2)Statewide PAC (3)State Party (5)County PAC (6)Ballot Issue/Franchise Committee (7)County/City C (8)Support Slate of Candidates	Audited			
CANDIDATE COMMITTEES ONLY:		─ `	Computer	
Candidate Name	Political Party	L		
Jerome F. Burken	Republican			
Office Sought	District (if Senate or House)		JAN 1 5 2003	
State Senator	13		OM 1.13	
M- 2-M	72		17/12/13	
SIGNATURE OF TREASURER (or person filing this report)	563-349-	404	1/13/03	
SIGNATURE OF TREASURER (or person filing this report)	TELEPHONE		DATÉ SIGNED	
Late filed reports are subject to	possible civil and crir	ninal p	enalties.	
SEE INSTRUCTIONS ON BACK AND COMPLETE THE	FOLLOWING SENTENC	E :		
	REPORT FOR AN/A (1) ELI		/(2)NON-ELECTION YEAR.	
(report date)	Indicate one 1		•	
CHECK IF AMENDMENT TO REPORT DATED		Local Co	mmittees, enter Date of Election	
	· 		,	
			Local Committees, enter County in ection is held	
	OF CASH ON HAND		* 1	
CASH ON HAND at the beginning of the reporting period. (This by the committee. This amount MUST be the same as of the last reporting period, or must be zero if this is fire	the cash on hand at the end		1,509.23	
ADD TOTAL MONEY TAKEN IN THIS PERIOD				
Schedule A: Cash Contributions total (Attach Schedule	e A) (*also see in-kind below)		719.00	
Schedule F: Loans Received total (Attach Schedule F)			
Schedule H: Total Sales of Campaign Property (Attack	n Schedule H)			
(Schedule H applies to Candidates' Comm	ittees Only)			
	SUB-TOT	AL\$	719.00	
SUBTRACT TOTAL MONEY SPENT THIS PERIOD			2 222 22	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)			2,228.23	
Schedule F: Loan Repayments total (Attach Schedule	F)			
CASH ON HAND at the end of this reporting period (if final reporting period		\$	0.00	
**UNPAID BILLS (From Schedule D - Attach Schedule D)		ď	0.00	
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule			0.642.16	
·	,		0.00	
*OUTSTANDING LOANS (From Schedule F - Attach Schedule F)\$				

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?)

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$ 0.00

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN



MONETARY
RECEIPTS

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)	
Burken for State Senate	

CHECK THIS BOX IF AMENDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER I N THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
10/31/02	ID# CK#	Brian L. Schmidt 1499 235th Ave. Delmar, IA 52037	None	\$ 50.00	
10/31/02	ID# CK#	Victor Burken 4298 Highway 136 Clinton, IA 52732	Father	100.00	
10/31/02	ID# CK#	James P. Cahill P.O. Box 99 Preston, IA 52069	None	249.00	
11/11/02	ID# CK#	Thomas J. Berthel 701 Tama St. Bldg B P.O. Box 609 Marion, IA 52302	None	250.00	
11/6/02	ID# CK#	David A. Rose 4426 Bellevue Rd. Clinton, IA 52732	None	70.00	
	ID# CK#				
			SUB-TOTAL	¢	

TOTAL (if last page of this schedule)

Page $\frac{1}{\text{(for Schedule A)}}$

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.



EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
	CK THIS BOX IF NDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Burken for State Senate

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
12/12/02	ID# CK# ₁₅₂	Clinton Printing Co. Inc. 1402 Roosevelt St. P.O. Box 64 Clinton, IA 52732	Brochures, envelopes, labels, postcards, mailings, postage	\$ 1,541.55
1/13/03	ID# CK# ₁₅₃	Jerome Burken 3753 220th St. Clinton, IA 52732	Reimbursement Postage	74.00
1/13/03	ID# CK# 153	Jerome Burken 3753 220th St. Clinton, IA 52732	Reimbursement: Office supplies	9.58
1/13/03	ID# CK# ₁₅₃	Jerome Burken 3753 220th St. Clinton, IA 52732	Reimbursement: Office supplies	13.04
1/13/03	ID# CK# ₁₅₃	Jerome Burken 3753 220th St. Clinton, IA 52732	Reimbursement: Fundraiser food	14.25
1/13/03	ID# CK# ₁₅₃	Jerome Burken 3753 220th St. Clinton, IA 52732	Reimbursement: Advertisement	40.50
1/13/03	ID# CK# ₁₅₃	Jerome Burken 3753 220th St. Clinton, IA 52732	Reimbursement: Envelopes	4.24
1/13/03	ID# CK# ₁₅₃	Jerome Burken 3753 220th St. Clinton, IA 52732	Reimbursement: T-shirts Total check #153: \$316.11	160.50
			SUB-TOTAL	\$ 1,857.66
			TOTAL (if last page of this schedule)	\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 56.6(3)(i).)

Page 1	of 2
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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
	CK THIS BOX IF ENDING FORM

COMMITTEE NAME (Must be same as on	Statement of Organization
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Burken for State Senate

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
1/13/03	ID# CK# ₁₅₄	Void		\$
1/13/03	ID# CK# ₁₅₅	Void		
1/13/03	ID# CK# 156	Jerome Burken 3753 220th St. Clinton, IA 52732	Reimbursement: Advertisement	46.06
1/13/03	ID# CK# ₁₅₆	Jerome Burken 3753 220th St. Clinton, IA 52732	Reimbursement: Advertisement	77.35
1/13/03	ID# CK# ₁₅₆	Jerome Burken 3753 220th St. Clinton, IA 52732	Reimbursement: Advertisement	39.36
1/13/03	ID# CK# ₁₅₆	Jerome Burken 3753 220th St. Clinton, IA 52732	Reimbursement: Advertisement	12.00
1/13/03	ID# CK# ₁₅₆	Jerome Burken 3753 220th St. Clinton, IA 52732	Reimbursement: Office supplies Total check #156: \$206.84	32.07
1/13/03	ID# CK# ₁₅₇	Jerome Burken 3753 220th St. Clinton, IA 52732	Reimbursement: Mileage	163.73
		-	SUB-TOTAL	\$ 370.57
			TOTAL (if last page of this schedule)	\$ 2,228.23

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(i).)

Page 2	$_{of}$ 2
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Burken for S	NAME (Must be same as on Statement of Organization) State Senate previously reported that remain unpaid must be included on this ule, as well as any new obligations incurred in this period.		☐ C	incurred indebtedness HECK THIS BOX AMENDING ORM
(DO NOT IN	LIGATIONS REMAINING THIS REPORTING PERIOD ICLUDE LOANS SHOW LOANS ON SCHEDULE F	·)	goods or s received, end of the regardless has been	
DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS SERVICES PROVIDED OF PURCHASED		BALANCE OWED AT CLOSE OF REPORTING PERIOD*
	None all campaign bills paid in full.			\$
		SUB-	TOTAL	\$
	\$			

SCHEDULE

of 1 (for Schedule D)

Page

CANDIDATE COMMITTEES NOTE:

*If actual figure is unknown, show "estimated" beside the figure.

FOR INSTRUCTIONS, SEE BACK OF FORM

*Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

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OR INSTRUCTIONS, SEE BACK OF FORM		SCHEDULE	
COMMITTEE NAME (Must be same as on Statement of Organization)		E (Rev. 06/97)	IN KIND CONTRIBUTIONS
Burken for State Senate			
	Reservant	_	K THIS BOX IF DING FORM

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	√ IF FOR FUND-RAISER CONTRIBUTION
10/30/02	Republican Party of Iowa 621 E. 9th St. Des Moines, IA 50309	None	Radio Buy	\$ 554.96	
10/31/02	Clinton County Republican Woman's Club 1315 N. 3rd St. Clinton, IA 52732	None	Newspaper ad	112.00	
10/31/02	Republican Party of Iowa 621 E. 9th St. Des Moines, IA 50309	None	Radio Buy	150.00	
11/05/02	Republican Party of Iowa 621 E. 9th St. Des Moines, IA 50309	None	Printing	2,048.50	
11/05/02	Republican Party of Iowa 621 E. 9th Des Moines, IA 50309	None	Printing	1,625.50	
11/01/02	Republican Party of Iowa 621 E. 9th Des Moines, IA 50309	None	Printing	116.00	
11/05/02	Republican Party of Iowa 621 E. 9th Des Moines, IA 50309	None	Postage	1,341.24	
11/07/02	Republican Party of Iowa 621 E. 9th Des Moines, IA 50309	None	Processing	1,189.52	
11/07/02	Republican Party of Iowa 621 E. 9th Des Moines, IA 50309	None	Processing	1,566.40	
11/07/02	Republican Party of Iowa 621 E. 9th Des Moines, IA 50309	None	Printing	724.62	
			SUB-TOTAL	\$ 9,228.74	
			TOTAL (if last	\$	
			page of this	Ť	
			schedule)		

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

of 2 (for Schedule E) Page_

FOR INSTRUCTIONS, SEE BACK OF FORM		SCHEDULE	
COMMITTEE NAME (Must be same as on Statement of Organization) Burken for State Senate		(Rev. 06/97)	IN KIND CONTRIBUTIONS
Burken for State Senate	Kosci rojini		THIS BOX IF DING FORM

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	√ IF FOR FUND-RAISER CONTRIBUTION
12/26/02	Republican Party of Iowa 621 E. 9th Des Moines, IA 50309	None	Printing	\$ 413.42	
		-			
			SUB-TOTAL	\$ 413.42	
TOTAL (if last page of this schedule)					

^{*}Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 2 of 2 (for Schedule F)